PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003										()	X.CC	ockernu) Sa	
CLAIMS AS FILED - PART I								SMALL	. Ei	VIITY	7	OTHE	R THAN
T	OTAL CLAIM	 S	(Colum	(Column 1)		(Column 2)		TYPE			OR		ENTITY
FOR										FEE]	RATÉ	FEE
			NUMBE	NUMBER FILED		BER EXTRA	1	BASIC	EE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			m	minus·20=			-	X\$ 9	=		OR	X\$18=	
INDEPENDENT CLAIMS				minus 3 =		. •		X43=			OR	X86=	
L	ULTIPLE DEPE	NDENT CLAIM	PRESENT	RESENT				+145			1		
* If the difference in column 1 is less than zero, enter "0" in column 2							-	TOTA	_		OR	+290=	
-	CLAIMS AS AMENDED - PART II							IUIA	٠ ا		JOR	TOTAL	
<u> </u>	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(Column 1)		(Colun	າກ 2)	(Column 3)	L	SMAL	LE	NTITY	OR		THAN ENTITY
AMENDMENT A	MILL	CLAIMS REMAINING AFTER		HIGHI NUME PREVIO	BER	PRESENT EXTRA		RATE		ADDI- TIONAL		RATE	ADDI- TIONAL
	Total	AMENDMENT	Minus	PAID F	OR	10	-		\dashv	FEE	1	-	FEE
	Independent		Minus	1 3	$\frac{\varphi}{3}$	- 0	1	X\$ 9=	4	·	OR	X\$18=	
۳	FIRST PRESENTATION OF MULT		IULTIPLE DE	PENDENT	CLAIM			X43=	\perp		OR	X86=	
								+145=			OR	+290=	
								TOTA ADDIT, FE	- 1		OR	TOTAL ADDIT, FEE	
<u>8</u>	(Column 2) (Column 3) CLAIMS HIGHEST												
AMENDMENT B	1.	REMAINING AFTER		NUMB	ER	PRESENT	Ш	RATE		ADDI-		RATE	ADDI- TIONAL
	T	AMENDMENT	,	PAID F		EXTRA		-{-	1	FEE	4	HAIE	FEE
	Total Independent	- Q	Minus	-0	<u>_</u>			×\$ 9=	$oldsymbol{\perp}$		OR	X\$18=	
		NTATION OF M	Minus ULTIPLE DEI	PENDENT	TAIM	1/1	П	X43=	X		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											OR	+290=	
· ADI											DR.	TOTAL DDIT. FEE	
_	A	(Column 1)	T	(Columi		(Column 3)	ì			•		`	,
NDMENTC		REMAINING AFTER AMENDMENT		HIGHE NUMBE PREVIOU PAID FO	R ISLY	PRESENT EXTRA		RATE	TI	ADDI- ONAL		RATE	ADDI- TIONAL
	Total	•	Minus	-20	,	=		X\$ 9=	╁	FEE	ŀ	VC+0	FEE
	Independent	•	Minus		3	= '4	-	X43=	╀		OR	X\$18=	0 &
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								L		OR	X86=	•
+145=											OR	+290=	•
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **TOTAL ADDIT. FEE										·	OR A	TOTAL ODIT. FEE	
T	he "Highest Num	noer Previously Pai ber Previously Pai	d For (Total or	SPACE is I Independent	ess than) is the l	i 3, enter *3.* highest number				niale box			